Schedule E)	FOR SE OF FORM 24/48
JAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Senate Conservatives Fund	
	C C00448696
Check if 24-hour report X 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Staples	M M / D D / Y Y Y Y
Mailing Address US Route 1	09 09 2015 Amount
City State Zip Code	32.67
Alexandria VA 22314-0000	Transaction ID: E4CF1DF95A3674FF6847 Date of Disbursement or Obligation
Purpose of Expenditure IE-DeSantis-Postage  Category/ Type	09 17 2015
Name of Federal Candidate Support Office	e Sought: House District:
Ronald DeSantis Oppose	President X Senate State: FL
Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	ursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
Senate Conservatives Fund	M - M / D - D / Y - Y - Y
Mailing Address PO Box 388	09 12 2015
Walling Address PO Box 388	Amount
City State Zip Code	166.60
Alexandria VA 22313-0388	Transaction ID : E72C25FFAA72143AD94F
Purpose of Expenditure	Date of Disbursement or Obligation
IE-DeSantis-Donation Processing  Category/ Type	09 / 12 / 2015
Name of Federal Candidate Support Office	e Sought: House District:
Ronald DeSantis Oppose	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	
	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	199.27
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Paul Kilgore	M / D D / Y Y Y Y Y
[Electronically Filed] Date 1	2 01 2015
Signature	

#### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	EXI ENDITORIES	PAGE 2 OF FORM	
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NU	
Senate Conservatives Fund		C C00448696	
Check if 24-hour report X 48-hour report	X New report Amends	report filed on	Y Y Y Y
Full Name of Payee Senate Conservatives Fund			Y   Y   Y
Mailing Address PO Box 388		09	2015
City S	tate Zip Code		16.75
	VA 22313-0388	Transaction ID : E6DBBF6143  Date of Disbursement or Obligati	41475DA2A
Purpose of Expenditure IE-DeSantis-Donation Processing	Category/ Type		2015
Name of Federal Candidate	Suppo	rt Office Sought: House Distric	
Ronald DeSantis	Oppos		e: FL
Calendar Year-To-Date Per Election for Office Sought	45428.82	Disbursement For: X Primary 2016 Other (specify) ▶	General
Full Name of Payee Senate Conservatives Fund  Mailing Address PO Box 388		09 26	mination 2015
		Amount	
<b>l</b> '	tate         Zip Code           VA         22313-0388	Transaction ID : E73D49F7768C8 Date of Disbursement or Obligat	
Purpose of Expenditure IE-DeSantis-Donation Processing	Category/ Type	M = M / D = D / Y =	2015
Name of Federal Candidate	X Suppo	rt Office Sought: House Distric	 xt:
Ronald DeSantis	Oppos		e: FL
Calendar Year-To-Date Per Election for Office Sought	45767.07	Disbursement For:	General
(a) SUBTOTAL of Itemized Independent Expenditures		> 35	55.00
(b) SUBTOTAL of Unitemized Independent Expenditures	s		7
(c) TOTAL Independent Expenditures		······ <b>&gt;</b>	-
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its age	or authorized committee or age		
Paul Kilgore	[Electronically Filed]	Date 12 01 2015	1
Signature			-

Schedule E)	PAGE 3 OF 9 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Senate Conservatives Fund	C C00448696
Check if 24-hour report X 48-hour report New report Amend	ds report filed on
Full Name of Payee Senate Conservatives Fund	Date of Public Distribution/Dissemination
Mailing Address PO Box 388	09 30 2015 Amount
City State Zip Code	727.75
Alexandria VA 22313-0388	Transaction ID : EC372072E2E1D471A953 Date of Disbursement or Obligation
Purpose of Expenditure IE-DeSantis-Donation Processing  Category/ Type	09 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Supp	port Office Sought: House District:
Ronald DeSantis Opp	ose President X Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 46494.82	Disbursement For:
Full Name of Payee Senate Conservatives Fund	Date of Public Distribution/Dissemination
	10 03 7 2015
Mailing Address PO Box 388	Amount
City State Zip Code	35.75
Alexandria VA 22313-0388	Transaction ID : E9374E4657C60440D921 Date of Disbursement or Obligation
Purpose of Expenditure IE-DeSantis-Donation Processing  Category/ Type	10 / 03 / Y 2015
Name of Federal Candidate Sup	port Office Sought: House District:
Ronald DeSantis Opp	ose President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 46530.57	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	> 763.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(-)	
(c) TOTAL Independent Expenditures	······································
Under penalty of perjury I certify that the independent expenditures reported herein with, or at the request or suggestion of, any candidate or authorized committee or a party committee) any political party committee or its agent.	
Paul Kilgore [Electronically Filed]	Date 12 01 2015
Signature	200

#### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	IXI ENDITORIES	PAGE 4 OF 9 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Senate Conservatives Fund		C C00448696
Check if 24-hour report X 48-hour report	New report Amends report	filed on fil
Full Name of Payee Senate Conservatives Fund		Date of Public Distribution/Dissemination
Mailing Address PO Box 388		10 10 2015  Amount
City Sta	ate Zip Code	4.75
	/A 22313-0388	Transaction ID : E8B82EBD18CFF4530B43 Date of Disbursement or Obligation
Purpose of Expenditure IE-DeSantis-Donation Processing	Category/ Type	10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support (	Office Sought: House District:
Ronald DeSantis	Oppose	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		Disbursement For:
Full Name of Payee Senate Conservatives Fund  Mailing Address PO Box 388		Date of Public Distribution/Dissemination
		Amount
<b>l</b> '	ate Zip Code /A 22313-0388	5.50  Transaction ID : EC934007B134247CEBA5  Date of Disbursement or Obligation
Purpose of Expenditure IE-DeSantis-Donation Processing	Category/ Type	10 17 2015
Name of Federal Candidate	Support (	Office Sought: House District:
Ronald DeSantis	Oppose	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures		10.25
(b) SUBTOTAL of Unitemized Independent Expenditures		<b>&gt;</b>
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent e with, or at the request or suggestion of, any candidate o party committee) any political party committee or its ager	r authorized committee or agent of e	
Paul Kilgore	[Electronically Filed] Date	12 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		

Schedule E)	FOR SE OF FORM 24/48	
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Senate Conservatives Fund		
	C C00448696	
Check if 24-hour report X 48-hour report New report Amends report filed	on Mam / Dab / Yayayay	
Full Name of Payee	Date of Public Distribution/Dissemination	
Senate Conservatives Fund	10 24 2015	
Mailing Address PO Box 388	Amount	
City State Zip Code	190.05	
Alexandria VA 22313-0388	Transaction ID : E8D2B706F920A4E3DABF Date of Disbursement or Obligation	
Purpose of Expenditure IE-DeSantis-Donation Processing  Category/ Type	M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Name of Federal Candidate Support Office	e Sought: House District:	
Ronald DeSantis Oppose	President State: FL Senate	
Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	ursement For:	
Full Name of Payee Senate Conservatives Fund	Date of Public Distribution/Dissemination	
Senate Conservatives Fund	10 31 2015	
Mailing Address PO Box 388	Amount	
City State Zip Code	39.00	
Alexandria VA 22313-0388	Transaction ID : E5F5797ED2C874C38B45 Date of Disbursement or Obligation	
Purpose of Expenditure IE-DeSantis-Donation Processing  Category/ Type	10 31 2015	
Name of Federal Candidate Support Office	e Sought: House District:	
Ronald DeSantis Oppose	President Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	ursement For:	
(a) SUBTOTAL of Itemized Independent Expenditures	229.05	
(b) SUBTOTAL of Unitemized Independent Expenditures	1 1 7 1 1 7 1 1 7 1	
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	•	
	2 01 2015	
Signature		

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Senate Conservatives Fund	C C00448696
	J
Check if 24-hour report X 48-hour report New report Amends report filed	on Mam / Dad / Yayayay
Full Name of Payee Senate Conservatives Fund	Date of Public Distribution/Dissemination
	11 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 388	Amount
City State Zip Code	34.25
Alexandria VA 22313-0388	Transaction ID : E3BAB450D6ECA47D89F5 Date of Disbursement or Obligation
Purpose of Expenditure IE-DeSantis-Donation Processing  Category/ Type	11 07 / 2015
Name of Federal Candidate Support Office	e Sought: House District:
Ronald DeSantis Oppose	President State: FL Senate
Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	orsement For:
Full Name of Payee	Date of Public Distribution/Dissemination
Senate Conservatives Fund	M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
Mailing Address PO Box 388	Amount
City State Zip Code	20.30
Alexandria VA 22313-0388	Transaction ID : E41CC44ED1F504FBF8A0 Date of Disbursement or Obligation
Purpose of Expenditure IE-DeSantis-Donation Processing  Category/ Type	11 14 2015
Name of Federal Candidate Support Office	e Sought: House District:
Ronald DeSantis Oppose	President State: FL State:
Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	ursement For: X Primary General  Other (specify) ▶
•	27
(a) SUBTOTAL of Itemized Independent Expenditures	54.55
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	•
	2 01 2015
Signature	

Schedule E)	DENT EXICITE	ones	PAGE 7 OF 9 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Senate Conservatives Fund			C C00448696
Check if 24-hour report 48-hour report	rt New re	port Amends repo	rt filed on
Full Name of Payee Senate Conservatives Fund			Date of Public Distribution/Dissemination
Mailing Address PO Box 388			11 21 2015 Amount
			Amount
City	State	Zip Code	69.75
Alexandria	VA	22313-0388	Transaction ID: E7C610F13213B4E42843  Date of Disbursement or Obligation
Purpose of Expenditure IE-DeSantis-Donation Processing		Category/ Type	11 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District:
Ronald DeSantis		Oppose	President X Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		46894.17	Disbursement For: X Primary General 2016 Other (specify) ▶
Full Name of Payee			Date of Public Distribution/Dissemination
U.S. Postal Service			11 27 2015
Mailing Address 475 Lenfant Plz SW			Amount
City	State	Zip Code	327.90
Washington	DC	20260-0004	Transaction ID : E2996EDB760BA4097BCC Date of Disbursement or Obligation
Purpose of Expenditure IE-DeSantis-Postage		Category/ Type	11 24 2015
Name of Federal Candidate		X Support	Office Sought: House District:
Ronald DeSantis		Oppose	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		47359.74	Disbursement For: ☐ Primary ☐ General 2016 ☐ Other (specify) ▶
•			
(a) SUBTOTAL of Itemized Independent Expe	nditures		. ▶ 397.65
(b) SUBTOTAL of Unitemized Independent Ex	penditures		· <b>&gt;</b>
(c) TOTAL Independent Expenditures			•
	andidate or authorize		not made in cooperation, consultation, or concert f either, or (if the reporting entity is not a political
Paul Kilgore	[Electro	nically Filed] Date	12 01 2015
Signature			

Schedule E)	PAGE 8 OF 9 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Senate Conservatives Fund	C C00448696
Check if 24-hour report X 48-hour report New report A	Amends report filed on
Full Name of Payee	Date of Public Distribution/Dissemination
Staples	11 / 27 / 2015
Mailing Address US Route 1	Amount
City State Zip Code	le 137.67
Alexandria VA 22314-00	O000 Transaction ID : E4A3B539470C746B9937 Date of Disbursement or Obligation
Purpose of Expenditure IE-DeSantis-Printing  Categor Typ	pry/ 11 24 / 2015
Name of Federal Candidate	Support Office Sought: House District:
Ronald DeSantis	Oppose President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 47359.74	Disbursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
Envision Printers/Marketing	11 30 7 2015
Mailing Address 2 Riverbend Pkwy	Amount
City State Zip Code	de 13931.80
Leesburg VA 20176-0	O0000 Transaction ID : E0A6D8E74B34E4982995 Date of Disbursement or Obligation
Purpose of Expenditure IE-DeSantis-Direct Mail Production  Categor Typ	
Name of Federal Candidate	Support Office Sought: House District:
Ronald DeSantis	Oppose President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 61301	Disbursement For: Primary General 2016 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	
(b) SUBTOTAL of Unitemized Independent Expenditures	<b>&gt;</b>
(c) TOTAL Independent Expenditures	• • • • • • • • • • • • • • • • • • •
Under penalty of perjury I certify that the independent expenditures reported with, or at the request or suggestion of, any candidate or authorized committe party committee) any political party committee or its agent.	
Paul Kilgore [Electronically Filed	ed] Date 12 01 2015
Signature	

Schedule E)	PAGE 9 OF 9 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Senate Conservatives Fund	C C00448696
Check if 24-hour report X 48-hour report New report Amends report	ort filed on
Full Name of Payee Senate Conservatives Fund	Date of Public Distribution/Dissemination
Mailing Address PO Box 388	11 30 2015
	Amount
City State Zip Code	9.75
Alexandria VA 22313-0388	Transaction ID : ECA5C622871B14026821 Date of Disbursement or Obligation
Purpose of Expenditure IE-DeSantis-Donation Processing  Category/ Type	11 / 30 / Y Y Y Y Y Y Y
Name of Federal Candidate Support	Office Sought: House District:
Ronald DeSantis Oppose	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 61301.29	Disbursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
Mailing Address	Amount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure  Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support	Office Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	Disbursement For:  Primary  General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	9.75
(b) SUBTOTAL of Unitemized Independent Expenditures	·· •
(c) TOTAL Independent Expenditures	16088.49
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
Paul Kilgore [Electronically Filed] Date	e 12 01 2015
Signature	